				Complete if Known		
Sub	stitute for form 1449/	A/PTO		Application Number	10/559,982	
				Filing Date	February 2, 2006	
	FORMATION			First Named Inventor	Ruggero Fariello	
ST	'ATEMENT B	Y API	PLICANT	Group Art Unit	1617	
	(Use as many shee	ets as nece	ssary)	Examiner Name	Sahar JAVANMARD	
				Confirmation No.	6583	
Sheet	1	of	3	Attorney Docket No.	373987-011US (102895)	

Examiner 1 2 2	Cite	U.S. Publication	n Document		Date of Publication of
Initials*	No.1	Number	Kind Code (if known)	Name of Patentee or Applicant of Cited Document	Cited Document MM-DD-YYYY
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Examiner	Cite	For	Foreign Patent Document		Date of		Translation <sup>2</sup>	
Initials*	No.1	Office	Number	Kind Code (if known)	Publication of Cited Document MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Yes	No
	B1	GB	1140748		01-22-1969	Thomas Leigh et al.		
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OTHER DOCUMENTS - NON PATENT LITERATURE DOCUMENTS					
Examiner Cite Initials* No. 1		Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s).	Trans	lation <sup>2</sup>	
		volume-issue number(s), publisher, city and/or country where published.		No	

Examiner Signature	/Sahar Javanmard/	Date Considered	09/13/2009

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Sheet

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			,	Confirmation No.	6583	
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15106963.1.BUSINESS

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